

Spring 2010

Maryland Board of Pharmacy news

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The Mission of the Maryland Board of Pharmacy is to protect Maryland consumers and to promote quality healthcare in the field of pharmacy through licensing pharmacists and registering pharmacy technicians, issuing permits to pharmacies and distributors, setting pharmacy practice standards and through developing and enforcing regulations and legislation, resolving complaints, and educating the public.

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From The Executive Director's Desk

LaVerne Naesea

All Board units have been quite busy this quarter keeping up with the numerous bills that were proposed during the 2010 session, revamping the web site to conform with department requirements, recruiting new staff members, renewing contracts, catching up on inspections missed during the snowy winter, investigating new complaints and monitoring consent orders, and significantly lowering the number of pending applications for pharmacy technician registrations and distributor permits. Below are details of Board activities during the last quarter. It's been a bumpy flight as the Board has continued to expand, but well worth the trip.

Two significant pieces of proposed legislation that the Board tracked during the 2010 legislative session were the House and Senate versions of bills to 1) eliminate the sunset provision of drug therapy management in Maryland; and 2) require out of state wholesale distributors located in states with less restrictive laws than in Maryland to acquire national accreditation. Thanks to the direct involvement of Board members and staff, both sets of bills were passed.

Nearly filling all of its long term vacancies, the Board has recruited Kimberly Page France and Janet Seeds, as its new Pharmacist Compliance Manager and Public Information Officer, respectively. Ms. France most recently worked as Director of Product and Patient Safety for a Missouri pharmaceutical manufacturing company. In previous professional roles she has held responsibility for developing product risk management plans, monitoring pharmacy and medical practices and patient safety regulations, and providing direct pharmacy services to patients. She assumed supervision of the Compliance Unit in receiving and

investigating complaints, inspecting establishments and on-going monitoring of cases under Public Board Orders. Ms. Seeds, who had previously served as a Community Health Educator II with the Dorchester County Health Department, will perform under the supervision of Patricia Gaither, Administration and Public Support Unit Manager. Some of her responsibilities include responding to public information requests, coordinating and preparing Board publications and enhancing the image of the Board through the media and public events. The Board is fortunate to have recruited these two very talented individuals.

The Department of Health and Mental Hygiene (DHMH) required all units under its umbrella to adopt a new web site face. The Board of Pharmacy saw that directive as a win-win opportunity to also review and update its web site to make it more user-friendly and aesthetically pleasing to the eye. If you like our new look, drop the Board a line to let us know. Readers may have also noticed that DHMH now requires all units to use a universal web site address which incorporates the name of the department and the individual units. Instead of www.mdbop.org please substitute www.dhmh.maryland.gov/pharmacyboard when accessing the Board of Pharmacy web site. Start using the new address now before it's too late, because soon, the old address will be abolished.

The Board is also ever so close to fully updating and networking its antiquated database system and installing a system that has been customized and proven effective for use by several regulatory Boards throughout the country. Although the Board's current system was considered one of the best in meeting Mary-

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Visit the Board online at www.mdbop.org or email to mdbop@dhmh.state.md.us.

From The Executive Director's Desk

LaVerne Naesea

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land's occupational boards' processing needs during the 1990s computer revolution, Board operations now require much more sophisticated automation in order to keep up with its expansion. The manual operations currently required for staff members to process mail, checks, applications and complaints has contributed to hours of duplicated effort, created numerous of operational errors, and greatly added to the volume of daily phone calls.

For years the Board has talked about updating its automated system; however, it is finally at a point where implementation of a system that will delight and impress consumers and licensees, as well as Board and staff members, is imminent. The new system will provide more accessible and attractive on-line services for consumers and licensees, including: downloadable formatted rosters and verification pages; access to certain legal documents; an ability for licensees to change certain personal information; quicker notification of examination scores; and enhanced payment options. Staff will enjoy more linked systems that will help avoid significant errors and save significant time.

In their 2006 hit single "Beautiful Day," the Irish rock group, U2, sang "...see the bird with a leaf in her mouth – after the flood all the colors came out." I've been humming these lines as the Board of Pharmacy continues to adjust to its unprecedented growth and accomplish many of the achievements described above. The Board has surely experienced its share of floods over the past few years, having nearly doubled the size of its office space, tripled the number of staff members, doubled the number of regulated professionals and establishments and, most importantly, having had to insure compliance with more than twice as many mandated program areas than had been required only five years earlier (including, pharmacy technicians, new wholesale distribution and permitting rules, establishment inspections, drug therapy management, prescription drug repositories and vaccines). BUT, oh happy day, I've seen the bird with a leaf in her mouth and the Board's colors are beginning to come out!

LaVerne G. Naesea

Earlier Establishment Renewal: Distributors can renew permit starting September 1st

Summar J. Goodman, Licensing Manager

All Maryland Wholesale Distributors permits will expire on December 31, 2010. This year, the Board will allow distributors to renew permits as early as September 1, 2010. Renewing permits early will ensure continuous operation of wholesale facilities. To add to the convenience, distributors will be able to renew permits online. A letter will be sent to all distributors in June regarding their permit renewals. Also, see the Board's Summer Newsletter for more details.

LICENSING CORNER

Pharmacy Technician Application Alert: The Sooner, the Better

Michael Souranis, Licensing Chair and Board Commissioner

In order to facilitate the pharmacy technician registration process in a timely manner, and to avoid unnecessary and unforeseen delays recently experienced by applicants awaiting the results from their respective Criminal Justice Information System (CJIS) criminal background checks, the Board strongly encourages eligible technician candidates to promptly submit an application to the Board as soon as they enter into an approved training program. Once you have completed a training program, please forward your training program certificate of completion along with your examination results so that the Board can ascertain the veracity of the requirements of your pharmacy technician application and review the corresponding criminal background check results that may be pending from CJIS. Please remember to answer all questions contained in the application, truthfully, accurately, and to the best of your knowledge. Failing to disclose or accurately provide the requested information on your application may lead to denial of your application or disciplinary action.

Volunteer Recruitment

Information provided by Mark Bailey, DHMH

Volunteers building strong, healthy and prepared communities.

Pharmacists, Make a Difference... Are you ready to respond?

Join the Maryland Professional Volunteer Corps (MPVC), comprised of health practitioners and community volunteers willing to respond to public health emergencies, disasters, and assist with public wellness efforts. MPVC volunteers have deployed and assisted with national, regional and local needs---Hurricane Katrina in 2005, the 2009 presidential inauguration, flu clinic support in 2009-2010, and the hurricane in Haiti in 2010. Nearly 6,000 of your fellow Maryland residents have already joined. Will you also answer the call to help?

To register, please access the following web site which represents a new MPVC volunteer management system: mdresponds.dhmh.maryland.gov.

This is a password protected site for volunteers and allows individuals to indicate current contact information, professional skills and availability and subsequently update this information as it changes. If you are a current MPVC volunteer and have not "re-registered" with this new system, please do so.

For more information go to <http://preparedness.dhmh.state.md.us/MPVC>.

LEGISLATIVE/REGULATIONS UPDATE: Legislative Session 2010 Update

Anna Jeffers, Manager of Legislative and Regulatory Unit

2010 Maryland Legislative Session Bills of Importance to the Maryland Board of Pharmacy

Below are the results of the 2010 Legislative Session Bills of Importance to the Maryland Board of Pharmacy. Cross-filed bills are listed together.

Bill #	Bill Name	Result
SB 86	Correctional Services - Medication for Chronic or Acute Medical Condition - Waiver of Liability	FAILED
HB 114	Health Occupations Boards - Revisions	PASSED
SB 291	Health Occupations Boards - Revisions	PASSED
SB 163	State Board of Pharmacy - Wholesale Distributors - Accreditation and Reciprocity	PASSED
HB 868	State Board of Pharmacy - Wholesale Distributors - Accreditation and Reciprocity	PASSED
SB 165	Health Occupations - Therapy Management Contracts - Repeal of Sunset	PASSED
HB 600	Health Occupations - Therapy Management Contracts - Repeal of Sunset	PASSED
SB 370	Pharmacies - Delivery of Controlled Dangerous Substances	WITHDRAWN
HB 431	Medical Review Committees - Subpoenas - Medical Records for Mental Health Services	FAILED
HB 411	Statewide Advisory Commission on Immunizations - Membership, Sunset Extension, and Study of HPV Vaccine	PASSED
HB 713	Drug Schedules - Marijuana	FAILED
HB 712	Public Health – Medical Marijuana	FAILED
SB 627	Public Health – Medical Marijuana	FAILED
HB 627	Health Occupations Boards and Committees - Consumer Member Requirements	WITHDRAWN
HB 649	Environment - Pharmaceutical Disposal Act	FAILED
SB 662	Prescription Drugs - Controlled Dangerous Substances - Certification of Information on Delivery	FAILED
HB 862	Statewide Advisory Commission on Immunizations - Membership and Sunset Repeal	FAILED
SB 932	Civil Actions - Immunity from Civil Liability - Health Care Providers	FAILED
HB 1068	Criminal Law - Distributing a Controlled Dangerous Substance to a Minor Causing Death	FAILED
HB 1089	Health Occupations - Pharmacists - Laboratory Tests	WITHDRAWN
SB 1053	Health Occupations - Pharmacists - Laboratory Tests	WITHDRAWN
HB 1180	Prescription Confidentiality Act	WITHDRAWN
SB 1040	Prescription Confidentiality Act	FAILED
HB 1353	Veterans Affairs – Military Health Care Provider Transition Plan	PASSED
SB 1033	Veterans Affairs – Military Health Care Provider Transition Plan	PASSED
HB 1357	Professional Boards - Transfer of Funds - Repayment	FAILED
HB 1381	Prescription Drugs - Controlled Dangerous Substances - Certification of Information on Delivery	FAILED
HB 1387	Health Occupations - Pharmacists - Disposal of Unused Prescription Drugs ("Operation Take-back")	WITHDRAWN
HB 1445	Vehicle Laws - Controlled Dangerous Substances - Per Se Driving Offenses	FAILED
SB 698	Vehicle Laws - Controlled Dangerous Substances - Per Se Driving Offenses	FAILED

Community Pharmacy Billing

Harry Finke, Board Commissioner

There are some people who would argue that the practice of pharmacy is the most regulated profession in the United States while being one of the most competitive at the same time. There are many different ways to compete and still comply with federal and State laws. Unfortunately, it has come to the Board's attention that some community pharmacies are discounting insurance co-pays to increase their business and formulating contracts that may deny a patient their free choice of pharmacist or pharmacy services (which is prohibited by Health Occupations article 12-403(b)(8)).

The Federal Anti-Kickback Statute prohibits knowingly and willfully offering, paying, soliciting or receiving remunerations (e.g., anything of value), either for federal health care program referrals or in exchange for purchasing or arranging for the purchase of an item or service paid for through a federal health care program. Also, there is a separate yet similar federal anti-kickback law that applies to public contracts as well as various state anti-kickback laws which apply to pharmacy businesses. Be aware that if you operate a pharmacy as either a resident or non-resident permit holder, you may be subject to sanctions by the Maryland Board of Pharmacy if any of these laws or regulations are violated. Please make sure your business practice follows all laws, federal and State, before creating any new programs.

Why Me?

Anonymous Pharmacist investigated by the Board

As a pharmacist, many of you have received, or at some point in your career may receive, that dreaded phone call from your patient stating, "I think my prescription was filled wrong." Your initial emotions may range from fear, denial, blame and finally acceptance. Understanding that the earlier emotions are unhelpful and wasted allows you to reach the point of acceptance and prepares you to take the steps to resolve the problem and prevent future occurrences.

As a pharmacist, you have taken an oath to "do no harm," which is why prevention is your ultimate goal and resolving an error is equally important to patient safety. As trusted health care professionals, we provide not just a product, but a medical service in the form of each individual prescription we dispense. Considering each prescription as a medical service positions us to focus on that individual patient and the physician order we are completing. Obviously, if we prevent the error from occurring, the resolution process would not be necessary, hence the importance of prevention.

Are you taking the following steps?

VERIFYING THE PRESCRIPTION: Do you have a consistent pattern of verifying a prescription? One good rule of thumb is to verify the prescription from top to bottom, starting from the physician inscription (the type of practice is an indication of the drug prescribed, is it a dermatologist, cardiologist or endocrinologist). Is the patient's name clearly written; it is possible your technician input the same name for individual family members, especially children? Next, is the drug, dosage form, strength, and directions clearly written? Many drugs are look-a-like or sound-a like, and physician handwriting will still be an issue as electronic prescribing comes online in most settings. Identify and focus on those drugs in product placement on the shelves and in the verification process (i.e., Tramadol, Trazadone, Norvasc, Navane, which come in similar strengths). Do the directions make sense? Coumadin is always daily or in some cases every other day---QID, QD, and QOD can easily be misinterpreted by a technician. With multiple prescriptions for the same patients, verify each one individually. Labels could have been switched during the production phase---look at your product and identify by color, inscription and dosage form, focus on the expiration date on the label or on unit-of-use products. Will the product expire prior to the patient's drug therapy period? Finally, verify quantity, refills, and valid prescriber signature. When dispensing to the patient, be proactive – new drug therapy is an excellent opportunity to review compliance, side effects, etc. and can allow you another opportunity to prevent an incorrect prescription from being dispensed.

RESOLVING A PRESCRIPTION ERROR: How you handle an error when it is brought to your attention is critical. Whether you or your partner dispensed the product, remember your patient is also dealing with a range of emotions---anger, fear, disappointment, and lack of trust, to name a few. Take every error seriously, even if in your professional judgment it does not have medical consequences. It is very serious for your patient. Do not delegate this responsibility – intervene and take the customer to a private setting. Be honest and forthright, explain the medical issues, if any, and apologize for the incident and correct the prescription promptly. Contact the prescriber and provide necessary feedback to allow him/her to adjust the therapy, if necessary. Make yourself available to answer any future concerns your patient may have. Taking ownership and being proactive minimizes the medical, legal and customer service issues that could arise by not handling the incident correctly.

Continued on next page

Compliance Corner - continued

Finally, go back and review your system and behavior. If we do not do things differently, we often get the same results. This cannot only impact you, but your fellow pharmacists. Should you flag high-risk drugs with a red sticker? Are input errors brought to the attention of the technician? Do you have a system to review shelves for outdated, recalled or damaged products? Is your technician verifying customer information, such as address, phone number and birthday when a prescription is dropped off? When you have done all you can do to prevent and resolve an error, you have met your obligation to “do no harm” and will remain as you are today: a trusted professional for the public.

DISCIPLINARY ACTIONS

Pharmacist	Lic. #	Status	Date
Jay Sherr	11168	Revoked	1/13/10
Cashmir Luke	19006	Revoked	2/17/10
Adebisi Ola	15402	Suspended	2/26/10
Kim Hulko	10047	Suspended	3/12/10
Wayne Glover	06644	Voluntary Surrender	3/17/10
Paul Ejedoghaobi	17416	Probation	3/25/10

Pharmacist Technicians			
Tech Name	Reg. #	Status	Date
Nekia Moore	T00854	Suspended	2/26/10

Establishment Name	Permit #	Status	Date
McKesson	D01839	Order of Denial	12/16/09
Cardinal, Syracuse Inc.	D01277	Order of Denial	12/16/09
ANEWRx	N/A	Cease and Desist	1/22/10
Express Care	N/A	Cease and Desist	1/26/10
McKesson	D01722	Cease and Desist	3/03/10

Reminder:

**The Maryland Board of Pharmacy
website address has changed.**

Make a Note!!!

www.dhmf.maryland.gov/pharmacyboard

PRACTICE CORNER

The Maryland Pharmacy Law Book

*Reid Zimmer, Practice Committee Chair
and Board Commissioner*

In pharmacies there are many reference books that vary in information that is pertinent to the practice setting of the permit holder. There is one book that is rarely entered into and that is the Maryland Pharmacy Law book. Pharmacists and others use the book on occasion to get answers to the legality of a certain issue when it arises.

The Maryland Pharmacy Law Book is published every two years and contains the current pharmacy laws that are in effect at that time. Pharmacy laws may change due to new bills enacted by the State and Federal legislatures, and revisions to current regulations may be made due to evolving practice issues. When the Board proposes a change to a regulation, it is published in the Maryland Register for a comment period and if no comments are received or after revisions are considered from the comments received, it is published in its final form in the Maryland Register. The new regulations will not be incorporated into the Maryland Pharmacy Law Book until a new issue is published, although every licensee is responsible for keeping up to date with changes in the law.

The current book was changed two years ago to make it more “user friendly” with the addition of a “Quick Search Index” which was based on the most frequent questions that the Board receives from practitioners and permit holders (page xi-xviii). This is a tool that helps guide the person looking for a quick answer. There is the regular index in the back of the book if the item is not found in the Quick Search Index. The book is divided into three basic parts. There is the Pharmacy Law section (page 1-47) that contains current laws as of 2008. The Pharmacy Regulations section (page 49-180) that has the regulations listed that exist to administer the enacted laws. The remainder of the book has related Maryland Statutes and federal regulations that may directly or indirectly affect pharmacy practice.

This book has a wealth of information on pharmacy law in our state. Practitioners of pharmacy and other professions are held responsible to abide by the laws and regulations, which are enacted for healthcare safety and the protection of health information for the citizens of Maryland.

The Department of Health and Mental Hygiene (DHMH), acting on a directive from the Governor of Maryland, is making a change to insure that all DHMH program units consistently use ‘dhmf.state.md.gov’ in their website addresses. Therefore, the Maryland Board of Pharmacy’s website address has changed to www.dhmf.maryland.gov/pharmacyboard. Consistency is a good thing! Consistency is important in our work output, our policies and procedures, our client relationships, our business partnerships, AND our websites.

The Board of Pharmacy’s former website will be available for a limited time. Please update your computer’s bookmarks, favorite’s pages and contact information for the Board of Pharmacy, as soon as possible, to reflect the new website address.



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ADMINISTRATION • 410-764-5929	
Patricia Gaither, Administration & Public Support Manager; Vacant, Public Information Officer; Anasha Page, Office Secretary; Vacant, Secretary/Receptionist	Responds to inquiries regarding Fiscal, Budget, Procurement, Travel, Personnel and Public Information
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Vacant, Pharmacist Compliance Officer; Emory Lin, Pharmacist Inspector; Joseph Taylor, Lead Inspector; Nancy Richard, Inspector; Jeannelle McKnight, Inspector; Shanelle Young, Inspector; Steven Kreindler, Compliance Coordinator; Colin Eversley, Compliance Investigator; Vanessa Thomas Gray, Compliance Secretary	Responds to inquiries regarding Complaints, Pharmacy Practice, Disciplinary, Inspections, Investigations and Pharmacists Rehabilitation
LICENSING • 410-764-4756	
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MANAGEMENT INFORMATION SERVICES • 410-764-5929	
Tamarra Banks, MIS Manager; Michelle Xu, Database Officer	Responds to inquiries regarding Computer, Database and Website and On-line Renewals

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BOARD COUNSEL

Linda Bethman
 Francesca Gibbs

BOARD MEETINGS

The Pharmacy Board meetings are held the third Wednesday of each month and are open to the public from 9:00 a.m. – 12 noon at 4201 Patterson Avenue, Baltimore Maryland 21215.

The Board encourages all interested parties to attend the monthly Board Meetings.

2009 PUBLIC BOARD MEETINGS DATES

Third Wednesday of each month 9:00 am – 5:00 pm	October 21, 2009 November 18, 2009	December 16, 2009
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COMMITTEE MEETING DATES

Executive Committee Meetings First Wednesday of each month 10:00 am-12:00 pm	Licensing Committee Meetings Fourth Wednesday of each month 9:30 am-12:00 pm
Disciplinary Committee Meetings First Wednesday of each month 1:00 pm-4:30 pm	Practice Committee Meetings Fourth Wednesday of each month 1:00 pm-4:30 pm
Emergency Preparedness Committee Meetings* Second Wednesday of each month 9:00 am-12:00 pm	Long Term Care Workgroup Meetings* Monthly Meetings (except during the Legislative Session) Meeting Dates and Times TBD
Public Relations Committee Second Wednesday of each month 3:00 pm-5:00 pm	Acetaminophen Coalition Task Force Meeting* Second Wednesday every other month 1:00 pm to 2:45 pm

*open to the public

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